

PRINTER RUSH

(PTO ASSISTANCE)

Application : 10574961 Examiner : Boesen GAU : 1648
From : J. Black Location : (IDC) FMF FDC Date : 9/30/08
Tracking # : epm10574961 Week Date : 9/15/08

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW/FWCLM	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	<u>NbA 9/15/08</u>
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE:

Original claims 10, 24 and 27 depend on
canceled claim 2.

Please resolve.

[XRUSH] RESPONSE:

Please change claim dependency in claim 10 from "as claimed in claim 1 or 2" to recite: "as claimed in claims 1 or 5".
Please change claim dependency in claim 24 from "as claimed in claims 1 and 2" to recite: as claimed in claims 1 and 5".
Please change claim dependency in claim 27 from "as claimed in claims 1 and 2" to recite: "as claimed in claims 1 and 5".

INITIALS: AB

EXAMINER: PUBS contacts -- for DESIGNS: Don Fairchild, 703-308-9250 x126; for ALL OTHER FILES:
Bernadette Queen, 703-308-9250 x121

NOTE: This form will be included as part of the official USPTO record, with the Response document
coded as XRUSH.